U.S. Patent and Experience Office: U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Experience Office: U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Experience Office: U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Experience Office: U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Experience Office: U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Experience Office: U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Experience Office: U.S. DEPARTMENT OF COMMERCE
U.S. Patent and U.S. Patent and U.S. DEPARTMENT OF COMMERCE
U.S. DEPARTMENT OF U.S. DEPARTMENT

## UTILITY PATENT APPLICATION TRANSMITTAL

0.000	- 10 E CONSCION OF WHICH HEREIN CHIEFE IN CHIEF AND CHIEF HOURS OF THE HOURS					
Attor	ney Docket No.	MR1115-339	P TO			
First	Inventor	TZONG-YU WANG,	ET WES			
Title	METHOD OF R	EMOTE START OF	/90/			
Expre	ss Mail Label No		C63			

(Only for new nonpro	ovisional applications under 37 CFR 1		xpress Mail Label No.	60		
	ICATION ELEMENTS	.00101) E		issioner for Patents		
1	concerning utility patent application of		ADDRESS TO: Box Patent Appl	ication		
-   Fee Transmit	tal Form (e.g. PTO/SP/47)	contents.	7. CD-ROM or CD-R in duplicate, i			
Applicant clair	and a duplicase for fee processing)  ms small entity status.		Computer Program (Appendix)			
See 37 CFR	1.27.		8. Nucleotide and/or Amino Acid Sequenc (if applicable, all necessary)	e Submission		
3. (preferred strange	ement set forth below)	]	a. Computer Readable Form (CR	F)		
- Cross Refer	title of the invention rence to Related Applications		b. Specification Sequence Listing on:			
- Statement F	Regarding Fed sponsored R & D o sequence listing, a table,		i. CD-ROM or CD-R (2 co	pies); or		
or a comput	er program listing appendix of the Invention		II. paper			
- Brief Summa	ary of the invention		c. Statements verifying identity of	<u> </u>		
- Brief Description - Detailed Description - Claim(s) - Abstract of the	ption of the Orawings (if filed)	ł	ACCOMPANYING APPLICAT			
- Claim(s)			9 X Assignment Papers (cover shee	, ,,		
		_ //	10. 37 CFR 3.73(b) Statement (when there is an assignee)	X Power of Attorney		
4. X Drawing(s) (35	5 U.S.C. 113) [Total Sheets1	<u> </u>	11. English Translation Document (	•		
5. Dath or Declaration	[ Total Pages 1	] ]	12. Information Disclosure Statement (IDS)/PTO-1449	Copies of IDS Citations		
Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed)			13. Preliminary Amendment			
			14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)			
L DELE	TION OF INVENTOR(S) statement attached deleting inventor(s)		15. Certified Copy of Priority Document(s) (if foreign priority is claimed)			
named ii	n the prior application, see 37 CED		Request and Certification under			
i ar	2) and 1.33(b).		(b)(2)(B)(i). Applicant must attac or its equivalent.			
6. [ Application Dat	a Sheet. See 37 CFR 1.76	1	7. Other:	•••••		
18. If a CONTINUING APPL	ICATION, check appropriate box, ar	nd supply the	requisite information below and in a prelin	ninary amendment		
or in an Application Data Sh		•	,			
Prior application information:	Continuation-in-par	t (CIP)	of prior application No.:			
For CONTINUATION OR DIVIS	SIONAL APPS OF THE SEAL OF	— re of the prior :	Group Art Unit:			
The incorporation can only be	of the disclosure of the accompanying of the disclosure of the accompanying of the disclosure of the d	continuation or	application, from which an eath or declaration of divisional application and is hereby incorporated from the submitted application parts.	prated by reference.		
	19. CORRESP	ONDENCE A	DDRESS			
X Customer Number or Bar Code Label or X Correspondence address below				eddress below		
Name	Morton J. Rosenberg	) <u>&amp;6</u>		· · · · · · · · · · · · · · · · · · ·		
	Rosenberg, Klein & L	ee				
Address 3458 Ellicott Center Drive -			- Suite 101			
City	Ellicott City	State	MD Zip Code	21043		
Country	USA	Telephone		410-461-3067		
Name (Print/Type)	Morton J. Rosenberg	R		26,049		
Signature	Mutan	$\bigcirc$ $\bigcirc$ $\bigcirc$		<del>/ /  </del> `		
den Hour Statement: This form	s estimated to take 0.2 hours to accomp	<del>-</del>	Date )	18/01		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application.

PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL	. AMOI	TNL	OF	PAY	MENT
-------	--------	-----	----	-----	------

(\$) 750.00

Complete if Known			
Application Number			
Filing Date			
First Named Inventor	TZONG-YU WANG, ET AL.		
Examiner Name			
Group Art Unit			
Attorney Docket No.	MR1115-339		

METHOD OF PAYMENT	FEE CALCULATION (continued)				
1. X The Commissioner is hereby authorized to charge deficiencies of fees and credit any overpayments to:	3. ADDITIONAL FEES				
Deposit	Large Small				
Account Number 18–2011	Entity Entity Fee Fee Fee Fee Description	Ena Daid			
Deposit	Code (\$) Code (\$)	Fee Paid			
Account Name Rosenberg, Klein & Lee	105 130 205 65 Surcharge - late filing fee or oath				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status.	139 130 139 130 Non-English specification				
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. Payment Enclosed:  Credit card Money	112 920° 112 920° Requesting publication of SIR prior to				
Order Other	Examiner action				
FEE CALCULATION	113 1,840° 113 1,840° Requesting publication of SIR after Examiner action				
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month				
Large Entity Small Entity	116 390 216 195 Extension for reply within second month				
Fèè Fee Fee Fee Description G현e (\$) Code (\$) Fee Paid	117 890 217 445 Extension for reply within third month				
101 710 201 355 Utility filing fee	118 1,390 218 695 Extension for reply within fourth month				
106 320 206 160 Design filling fee	128 1.890 228 945 Extension for reply within fifth month				
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal				
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal				
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing				
SUBTOTAL (1) (\$) \$ 710	138 1,510 138 1,510 Petition to institute a public use proceeding				
(π) (π) ψ /10	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES Fee from	141 1,240 241 620 Petition to revive - unintentional				
Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)				
Total Claims 4 -20** = 0 x 18 = 0	143 440 243 220 Design issue fee				
Claims	144 600 244 300 Plant issue fee				
Multiple Dependent 270 = 0	122 130 122 130 Petitions to the Commissioner				
Large Entity Small Entity	123 130 123 130 Petitions related to provisional applications				
ree Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)	\$ 40			
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection				
104 270 204 135 Multiple dependent claim, if not paid	(37 CFR § 1.129(a)) 149 710 249 355 For each additional invention to be				
109 80 209 40 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	179 710 279 355 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$) 0	Other fee (specify)				
or number previously paid, if greater: For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3)	40			

SUBMITTED BY				Complete (if	Complete (if applicable)	
Name (Print/Type)	Morton J. Rosenberg	Registration No. (Attorney/Agent)	26,049	Telephone	410-465-6678	
Signature	Moiton Y.	( kpl		Date	7/12/01	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.